## ATTACHMENT H Consultant Disclosure Form A

OSC Use Only:	
Reporting Code: ( ) (	
Category Code:	
Data Contract Approved	

FORM A Omt/01- CM 100 205AA-3650390

State Consultant Services - Contractor's Planned Employment From Contract Start Date Through The End Of The Contract Term

State Agency Name: NYS Office of Mental Health Contractor Name: LocumTenens.com LLC - M. Vington

Agency Code: 3650000 Contract Number: OMH01-CM100205AA-3650390

Contract Start Date: 3/29/2018

Contract End Date: 9/4/2023

Employment Category <sup>1</sup>	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
29-1066-00	1	10720	\$2,671,066.67
		1 2n	
		<u>"</u>	
Total this page	0	0	
Grand Total	1	10,720	\$2,671,066.67

Name of person who prepared this report: Jessicca McDonald

Title: Contract Management Specialist Trainee

Phone #: (518) 549-5224

Preparer's Signature:

Date Prepared: 2/27/2018

(Use additional pages, if necessary)

Page 1 of 1

<sup>1. (</sup>Note: Access the O\*NET database, which is available through the US Department of Labor's Employment and Training Administration, on-line at online.onetcenter.org to find a list of occupations.)